

STATE OF CONNECTICUT DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF MATERIALS MANAGEMENT & COMPLIANCE ASSURANCE WASTE ENGINEERING & ENFORCEMENT DIVISION

Connecticut Hazardous Waste Manifest Photocopy Order Form

DEP USE ONLY	
Date Rec'd:	
Date Closed:	

General Information

1.	Requestor Information				
	Name:				
	Mailing Address:				
	City/Town:	State	e: CT Zip Code:		
	Business Phone:	ext.			
	Contact Person:	Title	e:		
	Email:				
			DED LICE ONLY		
2.	Manifest Information		DEP USE ONLY Accession Year:		
	Manifest Number:		Accession #:		
	Date Shipped: Batch Number (if known):	Box #:			
					
			Date Requested:		
3.	Generator Information		Date Received:		
	EPA ID #:				
	Site Address:				
	City/Town:				

Note: The DEP has sufficient space to keep only the most recent five (5) years of manifests on-site. It may take up to 5 weeks to produce photocopies of earlier manifests.

Please return this form, along with a check for \$0.25 per copy, to:

Hazardous Waste Manifest Program
Department of Environmental Protection
79 Elm Street
Hartford, CT 06106-5127

One request per form